## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

DEN 528

| CLAIMS AS FILED - PART I   |                      |   |                                       |                                |                      |                  |            | SMALL ENTITY        |                        |           | OTHER THAN          |                        |
|--|----------------------|---|---------------------------------------|--------------------------------|----------------------|------------------|------------|---------------------|------------------------|-----------|---------------------|------------------------|
| TC   | TAL CLAIMS           |   | (Column 1)                            |                                | (Column 2)           |                  |            | TYPE _              | <u> </u>               | OR<br>1 I | SMALL               |                        |
| Note that the same of the same |                      |   | 21                                    |                                |                      |                  |            | RATE                | FEE                    |           | RATE                | FEE                    |
| FO   | R<br>                |   | NUMBER FILED                          |                                | NUMBER EXTRA         |                  |            | BASIC FEE           | 375.00                 | OR        | BASIC FEE           | 750.00                 |
| то   | TAL CHARGEA          | BLE CLAIMS                                | 2/ minus 20=                          |                                | *                    |                  |            | X\$ 9=              | 9                      | OR        | X\$18=              |                        |
|  | EPENDENT CL          |   | <u> </u>                              | nus 3 =                        | * 0                  |                  |            | X42≃                |                        | OR        | X84=                |                        |
| MU   | LTIPLE DEPEN<br>—    | DENT CLAIM P                              | RESENT                                |                                |                      |                  |            | +140=               |                        | OR        | +280=               |                        |
| * If   | the difference       | in column 1 is                            | less than zero, enter "0" in column 2 |                                |                      |                  |            | TOTAL               | 384                    | OR        | TOTAL               |                        |
| *  | C                    | LAIMS AS A                                | MENDED                                | IENDED - PART II               |                      |                  |            |                     |                        |           | OTHER               | THAN                   |
|  |                      | (Column 1)                                |                                       | (Colur                         |                      | (Column 3)       |            | SMALLE              | ENTITY                 | OR        | SMALL               | ENTITY                 |
| IENT A   |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY         | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
| <b>AMENDMENT A</b>   | Total                | *   | Minus                                 | **                             | <del></del>          | =                |            | X\$ 9=              |                        | OR        | X\$18=              |                        |
|  | Independent          | *<br>NTATION OF M                         | Minus                                 | ***                            | CL AIM               | <u> </u>         |            | X42≈                |                        | OR        | X84=                |                        |
|  | FIRST PRESE          | NTATION OF MI                             | JLIIPLE DEF                           | ENDEN                          | CLAIIVI              |                  | ۱          | +140=               |                        | OR        | +280=               |                        |
|  |                      |   |                                       |                                |                      |                  | l          | TOTAL               |                        | OR        | TOTAL               |                        |
| -  |                      | (Column 1)                                |                                       | (Colur                         | mn 2)                | (Column 3)       | ,          | ADDIT. FEE          |                        |           | ADDIT. FEE          |                        |
| AMENDMENT B  |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVIO<br>PAID  | IEST<br>BER<br>DUSLY | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total                | *   | Minus                                 | **                             |                      | =                |            | X\$ 9=              |                        | OR        | X\$18=              |                        |
| AME  | Independent          | *   | Minus                                 | ***                            | - 01 4114            | =                |            | X42≈                |                        | OR        | X84=                |                        |
|  | LINOI PHESE          | NTATION OF MI                             | JETIPLE DEP                           | ENDENI                         | CLAIM                |                  | <u>ا</u> ا | +140=               |                        | OR        | +280=               |                        |
|  |                      |   |                                       |                                |                      |                  | 1          | TOTAL<br>ADDIT: FEE |                        |           | TOTAL<br>ADDIT. FEE |                        |
|  | _                    | (Column 1)                                |                                       | (Colur                         | mn 2)                | (Column 3)       | ,          | ADDIT: I EL         |                        |           | ADDIT. I'LLI        |                        |
| AMENDMENT C  |                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVIO<br>PAID  | IEST<br>BER<br>DUSLY | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total                | *   | Minus                                 | **                             |                      | =                |            | X\$ 9=              |                        | OR        | X\$18=              |                        |
| AME  | Independent          | *   | Minus                                 | ***                            | <b>- .</b>           | =                |            | X42≈                |                        | OR        | X84=                |                        |
| <u> </u>   | FIRST PRESE          | NTATION OF M                              | ULTIPLE DEF                           | 'ENDEN1                        | CLAIM                |                  | Į þ        |                     |                        |           |                     |                        |
| *  | If the entry in colu | l   | +140=                                 |                                | OR                   | +280=            |            |                     |                        |           |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.   |                      |   |                                       |                                |                      |                  |            |                     |                        |           |                     |                        |

61

PTO/SB/06 (05-03)
Approved for use through 4/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a valid OMB coalest survival.

|   |   | NT APPLIC                                 |              |   | Application or Docket Number DEN528 |                    |                    |                        |                    |                            |                        |
|---|---|---|--------------|---|-------------------------------------|--------------------|--------------------|------------------------|--------------------|----------------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |              |   |                                     |                    | SMALL E            | NTITY                  | OR                 | OTHER THAN<br>SMALL ENTITY |                        |
|   | FOR   | NUMBE                                     | NUMBER FILED |   | NUMBER EXTRA                        |                    | RATE               | FEE                    |                    | RATE                       | FEE                    |
|   | C FEE<br>FR 1.16(a))  |   |              |   |                                     |                    |                    | <u>s 37</u> 5          | OR                 |                            | s                      |
|   | L CLAIMS<br>FR 1.16(c))   | 21  | minus 20     | = · 1                                       |                                     |                    | x s <u>9</u> =     | 9                      | OR                 | x s=                       |                        |
|   | PENDENT CLAIMS<br>FR 1.16(b))                                   | 3   | minus 20     | = 0   |                                     |                    | x \$42 =           | 0                      | OR                 | x \$=                      | ,                      |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))   |   |   |              |   |                                     | + 5 =              |                    | OR                     | +5 =               |                            |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2.   |   |   |              |   |                                     |                    | TOTAL              | \$384.                 | OR                 | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II   |   |   |              |   |                                     |                    |                    |                        |                    |                            |                        |
| 1   | (Column 1) (Column 2) (Column 3)                                |   |              |   |                                     | SMALL I            | ENTITY             | OR                     |                    | R THAN<br>ENTITY           |                        |
| NT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                    |                    | RATE               | ADOI-<br>TIONAL<br>FEE |                    | RATE                       | ADDI-<br>TIONAL<br>FEE |
| ME  | Total<br>(37 CFR 1.16(c))                                       | •   | Minus        | ••  | <b>"</b> 0                          | 1                  | x s=               |                        | OR                 | x \$=                      |                        |
| AMENDMENT   | Independent<br>(37 CFR 1.16(b))                                 | •   | Minus        | •••   | <b>"</b> 0                          | 1                  | x \$ =             |                        | OR                 | x s =                      |                        |
| AM  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |   |              |   |                                     |                    | +s =               |                        | OR                 | + 5 =                      |                        |
|   |   |   |              |   |                                     |                    | TOTAL<br>ADD'L FEE |                        | OR                 | TOTAL<br>ADD'L FEE         |                        |
|   | (Column 1) (Column 2) (Column 3)                                |   |              |   |                                     |                    |                    |                        | _                  |                            |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                    |                    | RATE               | ADDI-<br>TIONAL<br>FEE |                    | RATE                       | ADDI-<br>TIONAL<br>FEE |
| OM  | Total<br>(37 CFR 1.16(c))                                       | •   | Minus        | ••  | =                                   |                    | x s=               |                        | OR                 | x \$=                      |                        |
| 1EN   | Independent<br>(37 CFR 1,16(b))                                 | •   | Minus        | •••   | -                                   | ]                  | x s=               |                        | OR                 | x s=                       |                        |
| 8   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |   |              |   |                                     |                    | +\$=               |                        | OR                 | + s =                      |                        |
|   |   |   |              |   |                                     | _                  | TOTAL<br>ADD'L FEE |                        | OR                 | TOTAL<br>ADD'L FEE         |                        |
|   |   | (Column 1)                                |              | (Column 2)                                  | (Column 3)                          | -                  | <u> </u>           |                        | -                  |                            |                        |
| ENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                    |                    | RATE               | ADDI-<br>TIONAL<br>FEE |                    | RATE                       | ADDI-<br>TIONAL<br>FEE |
| 1 ×   | Total<br>(37 CFR 1.16(c))                                       |   | Minus        | ••  | =                                   | 7                  | x \$=              |                        | OR                 | x \$=                      |                        |
| AMENDMEN  | Independent<br>(37 CFR 1.16(b))                                 | •   | Minus        | •••   | =                                   | 1                  | x s=               |                        | OR                 | x \$=                      |                        |
| ¥   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |   |              |   |                                     | 1                  | +5 =               |                        | OR                 | + 5 =                      |                        |
|   |   |   |              |   |                                     | TOTAL<br>ADD'L FEE |                    | OR                     | TOTAL<br>ADD'L FEE |                            |                        |
| <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter."3".</li> </ul> |   |   |              |   |                                     |                    |                    |                        |                    |                            |                        |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.